AFFIRMATIVE ACTION PLAN AND HARASSMENT POLICY CHECKLIST

ATTIMINATIVE ACTION FLAN AND HANGSWEINT FOLICI CITECREST				
			Company Name:	
NOTE: This is <u>not</u> an Affirmative Action Plan			Effectiv	e Date:
Contractor:	Plan MUST Include:	Yes	No	Comments:
	ent of equal employment opportunity			
, ,				
Covers:	Applicants for employment			
	Employees			
On basis of:	Race			
	Religion			
	Color			
	Sex			
	National Origin			
	Ancestry			
	Disability			
	Sexual Orientation			
	Gender Identity			
	Veteran Status			
	Housing Status			
Designates a person responsible for implementation of the Plan				
Provides for communication of the policy:				
	Within the Organization			
	Outside the Organization			
	(e.g., recruitment sources, unions)			
	l line of the			
Applies to all terms and conditions of employment (e.g., hiring, placement, promotion, duties, wages, benefits, use of facilities, layoff, discipline, termination)				
Provision for:	Recruitment from minority groups			
Provision for: Equal access to training programs				
Grievance Procedure				
Prohibits retal	ation for filing grievances			
Workforce Breakdown				
(figures up to	date within 6 months)			
HAR	ASSMENT POLICY CHECKLIST			
Definition of h	arassment			
	erson to receive and rassment complaints			
Prohibits retaliation for filing a harassment complaint				